

TÚSLA

An Ghníomhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

**CHILD
SAFEGUARDING
STATEMENT
COMPLIANCE
UNIT**

**CHILD SAFEGUARDING STATEMENT
SECTOR COMPLIANCE REVIEW**

**CHILDREN'S DISABILITY
NETWORK TEAMS (CDNTs)**



03/24-CSSCU-REP
V1.0
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Contents

1.0	Introduction.....	7
2.0	Context.....	7
3.0	Purpose.....	9
4.0	Methodology	9
4.1.	Selection of Relevant Services	9
4.2.	Written Communication to Relevant Services.....	9
4.3.	Sector Briefing.....	10
4.4.	Formal requests for Child Safeguarding Statements	10
4.5.	CSS Compliance Review & Support	10
5.0	Findings	11
5.1.	Lead Agency HSE Community Healthcare Organisations.....	12
5.2.	Lead Agency HSE Funded Non-Statutory Organisations.....	13
6.0	Analysis	14
6.1.	Strengths of a Compliant CSS.....	14
6.2.	Challenges of a Non-Compliant CSS	15
6.3.	Analysis of Findings.....	16
7.0	Recommendations	20
8.0	Conclusion.....	21
9.0	Appendices	21

Executive Summary

The Child Safeguarding Statement Compliance Unit (CSSCU) is the dedicated Unit within TUSLA set up to ensure that providers' Child Safeguarding Statements (CSS) are compliant with the requirements of Section 11 of the Children First Act 2015. The unit was established in March 2018 to provide both compliance support and enforcement in relation to Child Safeguarding Statement requirements (s.11). The CSSCU is responsible for Child Safeguarding Statement enforcement (s.12) and maintaining the Public Register of Non-Compliance (s.13).

The Child Safeguarding Statement Compliance Unit works on a supportive compliance basis. Referrals are received through voluntary submissions by providers, unsolicited information, sector compliance reviews and referrals by colleagues within Tusla. Where a service is found to be non-compliant with the requirement to have a compliant Child Safeguarding Statement, Tusla engages with the organisation, highlights areas requiring development in the statement, and affords them the opportunity to comply with requirements. Only when this avenue has been exhausted does the agency move to listing an organisation on the register of non-compliance (the final stage of enforcement).

Under Section 11 of the Children First Act 2015, Tusla's statutory role is to ensure that each organisation who is required to do so, prepares a written statement (referred to as a "child safeguarding statement") specifying the service being provided and the child safeguarding principles and procedures to be observed to ensure as far as practicable, that a child, while availing of the services, is safe from harm. The Child Safeguarding Statement is underpinned by the implementation of the required safeguarding policies, procedures, and practice that may be referenced in the statement. The CSSCU does not have oversight of the policies and procedures, but it is expected that they would be in line with the Children First Guidelines 2017 and implemented consistently by the Relevant Service.

A Children's Disability Network Team (CDNT) provides specialised support and services for children who have a disability and complex health needs associated with their disability. The CDNT supports a child's development, wellbeing and participation in family and community life. The team members share their knowledge, information, and skills with the family to support the child's development. The CDNT includes health and social care professionals with each team member specialising in different areas of child development. CDNTs have

occupational therapists, psychologists, physiotherapists, social workers, speech and language therapists. Some teams also have access to dietitians, family support workers, nurses, social care workers.

A Lead Agency Model is the structure for service delivery of children's disability services. Each lead agency has responsibility for the provision of services for children 0-18 with complex disability in the Children's Disability Network Team(s) (CDNT) assigned to that agency. The lead agency may be a HSE funded non-statutory organisation or a HSE Community Healthcare Organisation. Children's Disability Network Teams are providing relevant services under part 4 of Schedule 1 of the Children First Act, 2015 that refers to any work or activity which consists of treatment (including assessment which may lead to treatment), therapy or counselling provided to a child.

The CSSCU conducted a comprehensive CSS sector compliance review with CDNT's during 2023 and 2024. This report outlines the process of engagement with CDNTs, the methodology utilised in a CSS sector compliance review, an overview and analysis of findings in relation to CSS compliance and recommendations to enhance Child Safeguarding Statement compliance within the sector. The information and findings contribute to an improved understanding of CSS compliance within the CDNT sector. The recommendations emerging from the sector compliance review aim to support relevant services in developing and reviewing Child Safeguarding Statements.

Overall, the sector compliance review received positive engagement from relevant services included in the project. However, the CSSCU faced some communication challenges in maintaining contact with the relevant person/CDNT Manager for several services due to staff vacancies or changes in personnel which contributed to delays in the delivery of the project.

The CSSCU received a response from all services to the formal requests to review Child Safeguarding Statements. The statements submitted by CDNT providers were generally of a reasonable standard, but the majority required some improvement. While most statements referenced the required sections of the legislation, amendments were required in the majority to provide more specific details or to expand on the information already provided within the CSS document to sufficiently meet the requirements of Section 11 of the Children First Act, 2015. The use of lead agency template Child Safeguarding Statement documents that were not adequately updated to reflect the specific

CDNT service under review contributed significantly to the rate of non-compliance within the CDNT Sector.

There are 8 recommendations.

For the Child Safeguarding Statement Compliance Unit

1.	Share learning from the CSS sector compliance review with CDNT's in collaboration with the HSE Children First National Office and circulation of report findings published to the Tusla website.
2.	Liaise with the HSE Children First National Office in relation to guidance and supporting documentation to promote CSS compliance within CDNTs.
3.	Develop guidance for providers of relevant services on the use of Child Safeguarding Statement templates and adapting them for specific services.

For Children's Disability Network Teams

4.	Relevant persons/CDNT Managers to share learning from the sector compliance review within CDNT's and lead agencies to consider findings and recommendations when reviewing Child Safeguarding Statements as is required.
5.	Providers to consider the strengths of statements that are service specific; provide the required information; and are presented clearly and concisely when developing or reviewing CSSs to support greater outcomes upon implementation.
6.	Providers to consider commonly occurring areas of CSS noncompliance as outlined in the findings and analysis sections of this report when developing or reviewing their CSS, procedures, and training provision. Particular attention advised in relation to risk assessments; nature of service activities; and the use of template CSSs.
7.	Providers and those with responsibility for child safeguarding governance and oversight in CDNTs to ensure that the procedure for appointing a relevant person adequately considers how to fulfil the requirements of the role during periods of staff vacancies or change in personnel. This is to ensure that a relevant person is always available to engage with the agency, a parent, or member of the public who may request further information about a CSS.
8.	Providers to liaise with information, advice, and training support services to strengthen the implementation of safeguarding policies and procedures specified in the Child Safeguarding

	Statement if required. E.g., HSE Children First National Office or Tusla's Children First Information and Advice Service.
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Acknowledgements

We would like to acknowledge and thank those who contributed to the project.

- The Children's Disability Network Teams (CDNTs) who engaged with the CSSCU as part of this sector compliance review.
- The Lead Agencies from HSE Community Healthcare Organisations and HSE funded non-statutory organisations (Avista CLG, Brothers of Charity, CoAction, Cope Foundation, CRC, Enable Ireland, Kare, Stewarts Care, St. Gabriels Foundation, St. Joseph's Foundation and St. Michael's House).
- The Health Service Executive Children First National Office for support in planning the sector compliance review.
- The CSSCU team who conducted the review.

Authors

- Report prepared by Michelle Hennessy, Senior Compliance Officer and Megan O'Brien, Compliance Officer.

1.0 Introduction

The CSSCU prioritises supporting Child Safeguarding Statement compliance by working in partnership with providers of relevant services and sectors to ensure these groups are meeting their obligations to have statements in place. As part of this compliance support, the CSSCU in collaboration with the HSE Children First National Office identified established Children's Disability Network Teams (CDNTs) and proactively engaged with 93 networks. The purpose of the engagement was to conduct a comprehensive sectoral review to ensure that services had compliant Child Safeguarding Statements in place.

This report outlines the process of engagement with CDNT's, methodology utilised in the sector compliance review, an overview and analysis of findings in relation to CSS compliance and recommendations to enhance CSS compliance within the sector. The report is intended to contribute to an improved understanding of Child Safeguarding Statement (CSS) compliance within the Community Disability sector.

2.0 Context

A key strategic objective of the Child Safeguarding Statement Compliance Unit is to advance children's safety, development, and wellbeing by strengthening partnerships with providers of relevant services (as defined under schedule 1, Children First Act 2015). A provider of a relevant service is any organisation where more than one person works with children in a voluntary or paid capacity. Children's Disability Network Teams are providers of relevant services under part 4 of Schedule 1 of the Children First Act, 2015 that refers to any work or activity which consists of treatment (including assessment which may lead to treatment), therapy or counselling provided to a child.

In consultation with the HSE Children First National Office, the CSSCU initiated a sectoral compliance review project to proactively engage with all CDNT's due to the nature of service and needs of children availing of such services. The Children First National Guidance for the Protection and Welfare of Children identifies disability as a circumstance which may make children more vulnerable to harm. Children with disabilities may be more likely to be harmed due to high care needs, difficulties expressing their concerns or because they may not recognise abuse. The complexity of a child's needs may also impact professionals' ability to recognise signs of abuse. Therefore, those providing services to children with disabilities require robust safeguarding measures to ensure children are safe from harm while availing of services.

A children's disability network team (CDNT) provides specialised support and services for children who have a disability and complex health needs associated with their disability. The CDNT supports a child's development, wellbeing and participation in family and community life. The team members share their knowledge, information, and skills with the family to support the child's development. The CDNT includes health and social care professionals with each team member specialising in different areas of child development. CDNTs have occupational therapists, psychologists, physiotherapists, social workers, speech and language therapists. Some teams also have access to dietitians, family support workers, nurses, social care workers. A Lead Agency Model is the structure for service delivery of children's disability services. Each lead agency has responsibility for the provision of services for children 0-18 with complex disability in the Children's Disability Network Team(s) (CDNT) assigned to that agency. The lead agency may be a HSE funded non-statutory organisation or a HSE Community Healthcare Organisation.

Under Section 11 of the Children First Act 2015, Tusla's statutory role is to ensure that each organisation who is required to do so, prepares a written statement (referred to as a "child safeguarding statement") specifying the service being provided and the child safeguarding principles and procedures to be observed to ensure as far as practicable, that a child, while availing of the services, is safe from harm.

Harm as defined in the Children First Act 2015, means 'in relation to a child—

- a) assault, ill-treatment, or neglect of the child in a manner that seriously affects or is likely to seriously affect the child's health, development, or welfare, or
- b) sexual abuse of the child, whether caused by a single act, omission or circumstance or a series or combination of acts, omissions, or circumstances, or otherwise'.

The Child Safeguarding Statement is underpinned by the implementation of the required safeguarding policies, procedures, and practice that may be referenced in the statement. The CSSCU does not have oversight of the policies and procedures, but it is expected that they would be in line with the Children First Guidelines 2017 and implemented consistently by the Relevant Service.

3.0 Purpose

The purpose of this sectoral compliance review of Child Safeguarding Statements is to provide information, key learning, and support to the sector in relation to CSS compliance with requirements of section 11 of the Children First Act, 2015.

This report is published on the TUSLA website and provides generalised information to parents, children, young people, and service users in respect of the overall CSS compliance level within the sector. It aims to contribute to a greater level of confidence by interested parties in the safety of services children are using.

4.0 Methodology

This report is based on data generated from formally requesting Child Safeguarding Statements from 93 providers of Community Disability Network Team's. This process of engagement with relevant services for a CSS sector compliance review began in August 2024 and concluded in March 2024. The process included the identification and selection of CDNT's for inclusion; communication with all providers; sector briefing; formal requests for Child Safeguarding Statements (CSS); feedback on CSS compliance review and support to relevant services to achieve compliance with the requirements of the Children First act, 2015.

4.1. Selection of Relevant Services

The CSSCU consulted with the HSE Children First National Office to collate a list and contact details for all established Children's Disability Network Teams. 93 networks were identified to be included in this sector compliance review.

4.2. Written Communication to Relevant Services

CSSCU issued communication to all relevant services selected as being within remit of the sector compliance review to introduce the CSSCU and request confirmation of details for the lead agency and relevant person for the purpose of the CSS within the CDNT. Once contact details were confirmed, the CSSCU wrote to all CDNTs to inform them of the intention of CSSCU to engage with them in relation to a Child Safeguarding Statement compliance during 2023. The communication invited services to an online briefing session to outline the work of the CSSCU; the requirements of a Child Safeguarding Statement as outlined in the Children First Act 2015; and the process involved in a formal

request from CSSCU to submit a copy of a Child Safeguarding Statement for compliance review and feedback.

CDNT providers were advised that CSSCU always begin engagement from the perspective of supportive compliance and aim to support an organisation to meet the requirements of the Children First Act 2015 to ensure all children availing of the service are safe from harm. However, the CSSCU also has enforcement responsibilities in relation to CSS compliance and may initiate escalation to enforcement procedures if required. This was set out in all communications to the relevant providers.

4.3. Sector Briefing

A briefing was offered to the sector. The CSSCU briefing included the following.

- Introduction to the work of CSSCU.
- Outline of the purpose and context of the CSS sector compliance review.
- Details of the requirements of a Child Safeguarding Statement as outlined in the Children First Act 2015.
- Learning from a previous sector compliance review with Residential Disability Services.
- Overview of the process involved in a formal request from CSSCU to submit a copy of a Child Safeguarding Statement for compliance review and feedback.
- Links to CSS information and resources (see Appendix 1).

4.4. Formal requests for Child Safeguarding Statements

Letters formally requesting the relevant service to submit a copy of the providers Child Safeguarding Statement to the CSSCU for compliance review were issued to 93 services (see Appendix 2). The circulation of formal requests to services commenced in September 2023 and were issued to a schedule of services on a weekly basis to ensure that the unit could provide timely feedback on reviews.

4.5. CSS Compliance Review & Support

On receipt of a Child Safeguarding Statement the CSSCU utilised the units review outcome form (see Appendix 3) to conduct a desktop review to record areas of compliance or noncompliance within the CSS document. Feedback was issued to all relevant services on the outcome of the review. For those where amendments were required, CSSCU staff engaged with relevant services to support them in achieving compliance with the requirements of Section 11 of

the Children First Act, 2015. In some incidents subsequent review feedback was required to be issued to relevant services.

5.0 Findings

There were 93 CDNT's identified for inclusion in the CSS sector compliance review who were formally requested to submit a Child Safeguarding Statement (CSS) to the CSSCU. The lead agencies were a combination of both HSE Community Healthcare Organisations and HSE Funded Non-Statutory Organisations. HSE Community Healthcare Organisations lead 42 networks and HSE Funded Non-Statutory Organisations lead 51 networks through 11 organisations.



All documents submitted in response to request for CSS were accepted as a valid Child Safeguarding Statement. However, it was observed that the majority of CDNTs are using template documents rather than developing a bespoke service specific CSS. When using a template, the details within the CSS, risk assessment and safeguarding procedures referenced must be amended to apply to the specific CDNT so that it can be implemented effectively within the relevant governance structures of the service being delivered.

For the purpose of clarity, the findings from the review of CDNT's Child Safeguarding Statements are grouped in relation to lead agency type and

presented in two parts in relation to HSE Community Healthcare Organisations and HSE Funded Non-Statutory Organisations.

During the duration of the sector compliance review project, stage one enforcement action was commenced with 1 service. The reason for enforcement action was due to no response to the formal request for CSS. No CDNT has been added to the public register of non-compliance.

5.1. Lead Agency HSE Community Healthcare Organisations

All CDNTs with a HSE Community Healthcare Organisation as the lead agency are using a HSE Child Safeguarding Statement Template which is compliant with the requirements of the Children First Act, 2015. However, 50% of the 42 HSE led networks had not amended the template sufficiently to reflect the CDNT service and were requested to provide additional information and/or amend the CSS.

In most cases the required information was included in accompanying CSS workbooks titled '*Guidance for HSE Child Safeguarding Statements and Risk Assessment Workbook*' that were not routinely submitted with the CSS. The workbooks support providers in developing Child Safeguarding Statements and risk assessments within the service. Once the CSS was reviewed with the workbook, the statements were deemed compliant for the CDNT service. Non-compliance feedback was provided in relation to two areas as outlined in the table below.

Description of Non-Compliance	Number of services applicable¹
Omitted or insufficient details on nature of services and activities provided.	9
Omitted or insufficient detail on risk assessment adequately reflecting the service being provided or the procedures in place to manage the risks identified.	18

¹ Each service may have had more than one area of non-compliance and so this table is not cumulative.

5.2. Lead Agency HSE Funded Non-Statutory Organisations

Most CDNTs with a lead agency within 11 HSE Funded Non-Statutory Organisations are using an agency template Child Safeguarding Statement. However, 65% of the 51 non-statutory led networks had not amended the template sufficiently to reflect the CDNT service and were requested to provide additional information and/or amend the CSS. Non-compliance feedback was provided in relation to five areas as outlined in the table below.

Description of Non-Compliance	Number of services applicable ²
Omitted or insufficient details on nature of services and activities provided.	28
Omitted or insufficient details on safeguarding principles.	2
Omitted or insufficient detail on risk assessment adequately reflecting the service being provided or the procedures in place to manage the risks identified.	27
Omitted or insufficient detail on six specified safeguarding procedures. Procedures for appointing a relevant person, maintaining a list of mandated persons, and managing allegations against staff were most omitted.	24
Omitted or insufficient details for relevant person.	2

² Each service may have had more than one area of non-compliance and so this table is not cumulative.

6.0 Analysis

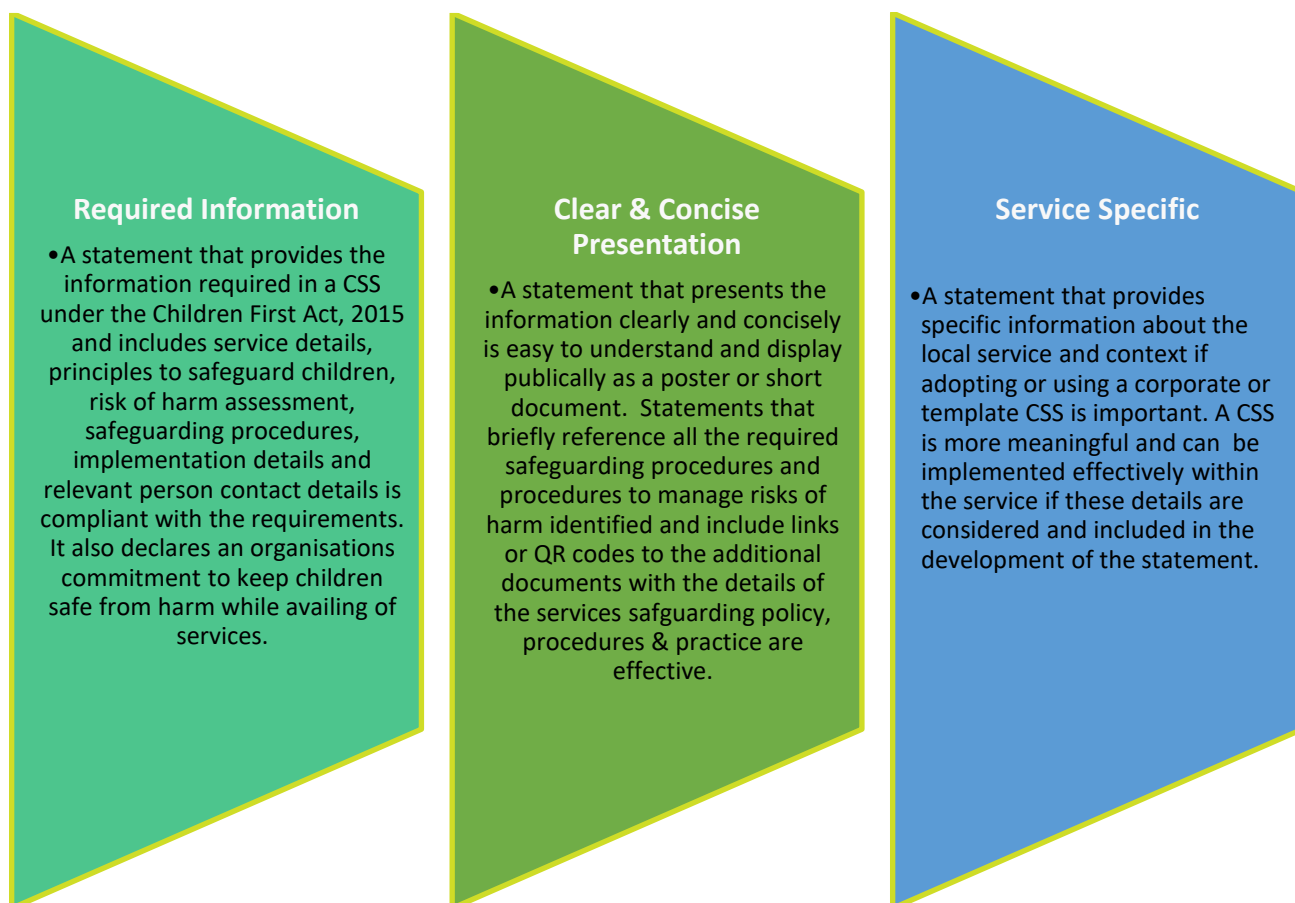
Overall, the sector compliance review received positive engagement from relevant services included in the project. However, the CSSCU faced some communication challenges in maintaining contact with the relevant person/CDNT Manager for several services due to staff vacancies or changes in personnel which contributed to delays in the delivery of the project.

The CSSCU received a response from all services to the formal requests to review Child Safeguarding Statements. The statements submitted by CDNT providers were generally of a reasonable standard, but the majority required some improvement. While most statements referenced the required sections of the legislation, amendments were required in the majority to provide more specific details or to expand on the information already provided within the CSS document to sufficiently meet the requirements of section 11 of the Children First Act, 2015. The use of lead agency template Child Safeguarding Statement documents that were not adequately updated to reflect the specific CDNT service under review contributed significantly to the rate of non-compliance within the CDNT Sector.

6.1. Strengths of a Compliant CSS

Providers of relevant services have a responsibility under section 10 of the Children First Act, 2015 to ensure, as far as practicable, that each child availing of the service from the provider is safe from harm while availing of that service. An effective Child Safeguarding Statement is underpinned by the implementation of safeguarding policies, procedures, and practice that may be referenced in the CSS. A compliant Child Safeguarding Statement must reflect the specific service being provided and set out clear principles of safeguarding. It must identify possible risks of harm to a child as defined in the Children First Act, 2015 and the procedures in place to mitigate against those risks. These risks should correlate with the service being provided to assist assessment of any potential harm that a child or young person may experience in that specific service. The CSS must state that required safeguarding procedures are in place and implemented. Service contact details, plans for CSS review and details of the relevant person must be clearly provided on the CSS. All information provided within the CSS must be accessible to service users, children, parents, and members of the public.

Therefore, a compliant statement is effective when it provides the required information, is presented clearly and is specific to the service being provided which in turn leads to greater outcomes upon implementation.



6.2. Challenges of a Non-Compliant CSS

A Child Safeguarding Statement (CSS) that is non-compliant with the requirements of Section 11 of the Children First Act, 2015 can impact the safety of children and young people while availing of a service. Without a clear commitment to keeping children safe from harm, a risk assessment and appropriate procedures in place, lack of clarity may arise within a service causing confusion for staff and volunteers in respect of how to prevent harm or how to respond to any child welfare or protection concerns. Omissions in a CSS document can also indicate potential gaps in training and subsequent implementation of safeguarding practice within services if a required procedures are absent or not known. Additional challenges related to different parts of the CSS are expanded on in the analysis of findings below.

6.3. Analysis of Findings

Child Safeguarding Statement non-compliance was identified in 54 (58%) Children's Disability Network Teams involved in the sector compliance review. The list below outlines the percentage of relevant services deemed non-compliant on first review that were required to make amendments in particular areas within the CSS to achieve compliance.



Insufficient information in relation to risk assessment and description of nature of service activities applied to the statements of both HSE and non-statutory led networks. Insufficient information in relation to safeguarding procedures, safeguarding principles and relevant person details also applied to the statements of some non-statutory led networks.

6.2.1. Risk Assessment

83% of services with a noncompliant CSS required amendments in relation to the risk assessment.

A risk assessment that considers any potential harm to a child while availing of the service needs to be fit for purpose in respect of the nature of service and activities provided to be deemed compliant. If potential risks of harm are omitted from a CSS, there can be limited awareness or understanding amongst personnel (staff/volunteers) that a particular risk may occur. The identification of a particular risk also prompts the development and implementation of appropriate safeguarding procedures to mitigate against the risk and to ensure that children availing of the service are safe from harm.

Within the CDNT sector and due to the nature of service to children with complex needs through a multi-disciplinary team consideration is required in the risk assessment to reflect individual and group therapy sessions and the various locations of service delivery such as schools, community venues, hospitals, residential centres, online platforms etc. If these considerations are contained within additional documentation that supports the CSS such as workbooks it is important that they are available and submitted with the statement if requested for a specific service.

Potential risks that apply to most relevant services are risk of harm to a child by a member of staff/volunteer; harm by a visitor to a service; bullying by an adult or peer; harm during outings or overnight activities; harm due to lack of supervision; harm through use of unauthorised photography; or online harm through social media/internet. If these risks and associated procedures to manage the risks are not considered during a risk assessment, relevant services are advised to consider if they are applicable to the service.

6.2.2. Nature of Service & Activities

69% of services with a noncompliant CSS required amendments to provide more detail in relation to the nature of the service or activities provided in the CSS.

A comprehensive description of the nature of the services and activities being provided allows the relevant service to consider all possible risks of harm to a child or young person while availing of a service. Several statements in this sector review omitted reference to the CDNT within service name and/or

description. There was also limited information about the purpose of a CDNT service and the types of activities the network may offer to children. Therefore, it was unclear if the statement submitted for the lead agency organisation applied to a particular CDNT and associated activities.

6.2.3. Safeguarding Procedures

44% of services with a noncompliant CSS required amendments in relation to the required safeguarding procedures as specified in s.11(3), Children First Act 2015. The three procedures most omitted were the procedure for appointing a relevant person, the procedure for maintaining a list of mandated persons and the procedure for the management of allegations of abuse or misconduct against workers/volunteers.

The Children First Act, 2015 specifies that the following procedures must be both referenced in a Child Safeguarding Statement as being in place and implemented in practice within the service. These documents were not requested as part of this project and services self-declared that they were in place.

1. Procedure for the management of allegations of abuse or misconduct against workers/volunteers.
2. Procedure for the safe recruitment and selection of workers and volunteers to work with children.
3. Procedure for provision of and access to child safeguarding training and information, including the identification of the occurrence of harm.
4. Procedure for the reporting of child protection or welfare concerns to Tusla.
5. Procedure for maintaining a list of the persons (if any) in the relevant service who are mandated persons.
6. Procedure for appointing a relevant person for the purpose of the statement.

Having these procedures in place supports services in reducing risks of harm to children and to respond appropriately if an incident occurs.

6.2.4. Safeguarding Principles

4% of services with a noncompliant CSS required amendments to provide more detail on principles to safeguard children from harm in the CSS.

A declaration of the service commitment to safeguarding principles supports the relevant service in communicating to children, parents, and members of the public that the responsibility to safeguard children while availing of the service is a priority and taken seriously. By clearly stating the service intention to prioritise safeguarding, parents are provided with a baseline of safety measures to be expected while children may be availing of the service.

6.2.5. Relevant Person Details

4% of services with a noncompliant CSS required amendments to the information provided in relation to the relevant person in the CSS.

A relevant person is appointed for the purpose of being the first point of contact in relation to the Child Safeguarding Statement. Having the name and contact details clearly identified on the CSS assists the relevant service in being accessible to children, parents or members of the public who may have a query or concern related to the Child Safeguarding Statement.

A challenge during this sector compliance review was maintaining communication with the relevant person due to staff vacancies and/or gaps in the procedure for appointing a relevant person that included a process for replacing the relevant person when the identified person is no longer available to fulfil the role of being the point of contact for the purpose of the CSS.

When the relevant person is not clearly identified with contact details on the publicly displayed CSS or is unavailable to communicate, it can make it difficult for an agency, parent, or member of the public to request further information about the CSS.

7.0 Recommendations

To continue to strengthen the safeguarding of children in Children's Disability Network Teams there are eight core recommendations.

For the Child Safeguarding Statement Compliance Unit

1.	Share learning from the CSS sector compliance review with CDNT's in collaboration with the HSE Children First National Office and circulation of report findings published to the Tusla website.
2.	Liaise with the HSE Children First National Office in relation to guidance and supporting documentation to promote CSS compliance within CDNTs.
3.	Develop guidance for providers of relevant services on the use of Child Safeguarding Statement templates and adapting them for specific services.

For Children's Disability Network Teams

4.	Relevant persons/CDNT Managers to share learning from the sector compliance review within CDNT's and lead agencies to consider findings and recommendations when reviewing Child Safeguarding Statements as is required.
5.	Providers to consider the strengths of statements that are service specific; provide the required information; and are presented clearly and concisely when developing or reviewing CSSs to support greater outcomes upon implementation.
6.	Providers to consider commonly occurring areas of CSS noncompliance as outlined in the findings and analysis sections of this report when developing or reviewing their CSS, procedures, and training provision. Particular attention advised in relation to risk assessments; nature of service activities; and the use of template CSSs.
7.	Providers and those with responsibility for child safeguarding governance and oversight in CDNTs to ensure that the procedure for appointing a relevant person adequately considers how to fulfil the requirements of the role during periods of staff vacancies or change in personnel. This is to ensure that a relevant person is always available to engage with the agency, a parent, or member of the public who may request further information about a CSS.

- | | |
|-----------|--|
| 8. | Providers to liaise with information, advice, and training support services to strengthen the implementation of safeguarding policies and procedures specified in the Child Safeguarding Statement if required. E.g., HSE Children First National Office or Tusla's Children First Information and Advice Service. |
|-----------|--|

8.0 Conclusion

This report outlines the process of engagement with relevant services, the methodology utilised in a CSS sector compliance review, an overview and analysis of findings in relation to CSS compliance and recommendations to enhance Child Safeguarding Statement compliance within the sector. The information contributes to an improved understanding of CSS compliance within the Community Disability Network Team's sector. The recommendations emerging from the sector compliance review aim to support relevant services in developing and reviewing Child Safeguarding Statements.

9.0 Appendices

Appendix 1: CSS Information & Resources
Appendix 2: Letter formally requesting Child Safeguarding Statement
Appendix 3: CSSCU Review Outcome Form

Appendix 1: CSS Information & Resources

Tusla has published advice and guidance and a sample template to assist providers in developing a Child Safeguarding Statement which are available on the [Tusla website](#) or through the links below:

- [What is a Child Safeguarding Statement](#) (Video)
- [Guidance on Developing a Child Safeguarding Statement](#)
- [Template to develop a CSS](#)
- [CSSCU Review Outcome Form](#)
- [Understanding Risk Assessments in Child Safeguarding Statements](#) (Video)
- [Child Safeguarding: A Guide for Policy, Procedure and Practice](#)
- [Child Safeguarding Resource List](#)
- [Child Safeguarding Statement Compliance Unit](#) on Tusla Website
- [Children First](#) on Tusla Website

Appendix 2: Letter formally requesting Child Safeguarding Statement (CSS)

XXXX
XXXX
XXXX
XXXX
XXXX

Estuary House
Henry Street
Limerick
V94 XT5F
csscu@tusla.ie

XX/XX/2023

Re: Child Safeguarding Statement Compliance Unit (CSSCU) CSS Sector Compliance Review with Children's Disability Network Teams (CDNTs).

Your Unique CSSCU Reference: **TU-XX-XXXX-XX**

NB: Please quote this reference when communicating with the CSSCU.

Dear XXXX,

Further to correspondence issued by email and a briefing to the Children's Disability Network Teams sector I write in relation to our intention to engage with organisations providing relevant services to children in Children's Disability Network Teams (CDNTs) in relation to a CSS sector compliance review.

The CSSCU is the dedicated Unit set up in Tusla to ensure that all providers' Child Safeguarding Statements are compliant with the requirements of parts 10 – 13 of the Children First Act 2015. The unit was established in March 2018 to provide both compliance support and enforcement. Please note that we always begin engagement from the perspective of supportive compliance and aim to support your organisation to meet the requirements of the Children First Act 2015 to ensure all children availing of your service are safe from harm. The CSSCU also has enforcement responsibilities in relation to CSS compliance and may initiate escalation to enforcement procedures if required.

You can find further information about the [Child Safeguarding Statement Compliance Unit](#) (CSSCU) or [Children First](#) on the Tusla website or through the links below.

- [What is a Child Safeguarding Statement](#) (Video)
- [Guidance on Developing a Child Safeguarding Statement](#)
- [Template to develop a CSS](#)
- [CSSCU Review Outcome Form](#)
- [Understanding Risk Assessments in Child Safeguarding Statements](#) (Video)
- [Child Safeguarding: A Guide for Policy, Procedure and Practice](#)

As has been advised, we are now formally requesting, pursuant to section 11(5)(b)(ii) of the Act, that you provide a copy of the Child Safeguarding Statement that you may have already developed to the Tusla Child Safeguarding Statement Compliance Unit (CSSCU).

Please provide the requested Child Safeguarding Statement within 14 days of receipt of this letter. You can submit the requested document via email, to cscu@tusla.ie, or post to the address above. Failure to do so may result in a further escalation of this matter and possible enforcement action as per the Children First Act 2015.

If you require any further information or clarification, please contact the CSSCU at cscu@tusla.ie. We look forward to supporting your network in relation to Child Safeguarding Statement compliance.

Yours sincerely,

Compliance Officer
Child Safeguarding Statement Compliance Unit

Appendix 3: CSSCU Review Outcome Form

Date of Review by CSSCU	Click or tap to enter a date.
Name of CSSCU Staff Member undertaking review	
Reason for Review (Provided Voluntarily / Resubmission as change to CSS/ Requested by CSSCU following UI/ Implementation Review/Referred by other Internal Dept.)	Choose an item.
Review Number (First / Second etc)	1 st
Case ID	

Organisation Name	
Setting (e.g. Sports Club; Educational Setting)	
Affiliated Organisation	
Funding Body (If available)	
Relevant Person Name	
Overall Purpose and Function	

PART 1: REVIEW OF CHILD SAFEGUARDING STATEMENT FOR COMPLIANCE WITH THE CHILDREN FIRST ACT 2015				
No.	Checklist Review Lines of Investigation	Yes (✓)	No (✓)	Rationale (If "No" only)

1.	Is the CSS titled correctly? (Must be titled Child Safeguarding Statement)	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Does the CSS include the name of the service to which the CSS refers?	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Are there clear Principles and evidence of a commitment to safeguard children from harm (i.e., how they intend to safeguard children)?	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Has the service provider specified the service being provided? (If more clarity needed, choose "No")	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Does the Statement include that a risk assessment has been completed to identify any potential for harm (as defined in the Act) to a child while availing of their services?	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Are the risks identified sufficient, relevant, and realistic, based on the nature of the service? (If there are obvious gaps in risk identification, choose "No")	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Are the procedures in place to manage the risks identified, specified in the statement?	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Are the procedures below (s.11(3), Children First Act 2015) specified as being in place?			

- “[Procedure] for reporting to [Tusla] by the provider or a member of staff of the provider (whether a mandated person or otherwise) in accordance with this Act or the [Children First] guidelines issued by the Minister under *section 6*” i.e. A reporting procedure.
- “[Procedure] in respect of any member of staff who is the subject of any investigation (howsoever described) in respect of any act, omission or circumstance in respect of a child availing of the relevant service” i.e. A procedure for managing allegations of abuse against staff.
- Procedure for selection or recruitment of any person as a member of staff of the provider with regard to that person’s suitability to work with children.
- Procedure for the provision of information and,

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	<p>where necessary, instruction and training to members of staff of the provider in relation to the identification of the occurrence of harm.</p> <ul style="list-style-type: none"> • Procedure for maintaining a list of the persons (if any) in the relevant service who are mandated persons. • Procedure for appointing a relevant person for the purposes of the [Statement]. 	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Is there either a date for adoption or review of the CSS? (Either is acceptable)	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Is the relevant person clearly identified and their name and contact details provided in the CSS?	<input type="checkbox"/>	<input type="checkbox"/>	
PART 1 TOTAL SCORES (No. of Yes / No results out of a possible 15)	/15	/15		

PART 2: Suggested and recommended amendments that would improve the quality of the CSS				
No.	Checklist for improved quality	Yes (✓)	No (✓)	Rationale (If "No" only)
11.	Does the Child Safeguarding Statement	<input type="checkbox"/>	<input type="checkbox"/>	

	include the definition of harm as set out in the Children First Act 2015?			
12.	Is the name and address of the provider included?	<input type="checkbox"/>	<input type="checkbox"/>	
13.	Does the Child Safeguarding Statement set out a commitment that all children will be equally protected from harm regardless of race, ability, ethnicity, or sexual orientation?	<input type="checkbox"/>	<input type="checkbox"/>	

TOTAL NUMBER OF YES ANSWERS (Out of a Possible 15)

/15

Score (Out of 11)	Outcome
15/15 (100%)	Compliant
< 15	Non-Compliant

Date of Review	REVIEW OF STATEMENT: COMPLIANCE OUTCOME	Signature

Guidance Notes

This review tool is used by Tusla's Child Safeguarding Statement Compliance Unit (CSSCU) when reviewing child safeguarding statements (CSS) which have been provided to the CSSCU, either voluntarily or in response to a request from the CSSCU. Providers of relevant services, under the Children First Act 2015, are required to prepare a CSS. Tusla has published [general guidance to assist providers](#) in writing their CSS, as well as a [CSS Sample Template](#). Tusla has also worked with a number of service sectors and government departments to assist them in developing tailored templates for particular contexts.

It may be helpful to providers of relevant services, when either developing or reviewing their CSS, to refer to the CSSCU Review Outcome Form to assist them to assess their compliance with the safeguarding requirements set out in the Children First Act 2015.

Specific Guidance for Reviewers:

- **Affiliate Organisation – this applies when a provider is a member of a larger umbrella body. This could include registering bodies such as HIQA, or membership organisations such as National Youth Council of Ireland, Sport Ireland, a National Governing Body of Sport, etc.**
- **Overall Purpose and Function – should be copied from the CSS section on service provided.**

Part 1 Guidance:

- **CSS Title – All CSS must be titled Child Safeguarding Statement.**
- **Principles – The CSS must include principles to keep children safe from harm, such as the right to be consulted, the right to protection, and adherence to inclusion/anti-discriminatory practice.**
- **Service being provided – the CSS must outline the service provided to children by the service provider.**
- **Risk assessment – the risks identified must be specific to the services provided, listed in the previous section. They must relate to the protection of the child/children from harm, as defined in the Children First Act 2015. Services can include an abridged list of the main risks identified and develop a more detailed secondary risk assessment document. Where a secondary risk assessment document is developed, this must be noted on the CSS and provided with the CSS whenever the CSS is requested.**
- **Risks sufficient, relevant and realistic – while a reviewing officer is not expected to know the nuances of every service whose CSS is being reviewed, there are certain general risks which it is reasonable to expect would be in place in most services. These include**

- Risk of harm (as defined in the Children First Act 2015) of a child by a member of staff/volunteer from things they have done (e.g. hurt a child) or failed to do (e.g. not report a concern);
 - Risk of harm (as defined in the Children First Act 2015) caused by lack of supervision;
 - Risk of harm (as defined in the Children First Act 2015) by a visitor to the service (workers, parents, placements, etc.);
 - Risk of harm (as defined in the Children First Act 2015) by another child in the service;
 - Risk of harm (as defined in the Children First Act 2015) of a child on outings by a member of staff/volunteer/stranger/peer;
 - Risk of harm (as defined in the Children First Act 2015) through access to ICT / unauthorised photography (e.g., social media or web access, electronic contact, etc).
- This is not a comprehensive or definitive list. Reviewers are expected to use their discretion and professional judgement when assessing risk assessments for compliance with the requirements of the Act. Service providers are responsible for carrying out a comprehensive assessment of the risk of harm to children while availing of their service.**
- **Specified procedures – all six specified procedures must be included in the CSS. It is not a requirement that they are listed separately to the risk assessment. It is not a requirement that the titles are verbatim as they are presented in the Act (e.g., Recruitment and selection procedures or reporting procedure for child protection or welfare concerns would both be acceptable).**
 - **Date for review – the CSS must specify either the date it was introduced/ratified or the proposed date for review. Either are acceptable.**
 - **Name and address of the provider – this information must be included as the Act places numerous responsibilities associated with the CSS directly on the Provider. For services operating at multiple sites, if they are using a single corporate CSS, address of provider can be head office.**
 - **Name and contact details for Relevant Person – this information must be included, as well as a clear designation that the person named is the relevant person.**

- **It is not a requirement that the CSS is signed by the provider**
- **CSS submitted should be final versions.**

Where the CSSCU reviews a CSS, all requisite components must be present and in line with the guidance to be deemed compliant.