



FREE RANGE  
KIDS.IE

## Child Safeguarding Statement March 2023

Free Range Kids Preschool at the Old Rectory in Croom is a registered part time service that runs during primary school terms, Monday to Friday, from 9am to 12pm, 09:30am to 12:30pm, and 1pm to 4pm.

In accordance with the requirements of the Children First Act 2015, and Children First: National Guidance for the Protection and Welfare of Children 2017, all staff have agreed to the Child Safeguarding Statement set out in this document.

### **Our commitment to safeguard Children from harm**

1. Free Range Kids preschool is committed to safeguarding the well being of children in our care and to providing a safe environment in which they can play, learn and develop.
2. Our service believes that the protection and welfare of the children attending is of paramount importance, regardless of all other considerations.
3. We are committed to upholding the rights of every child who attends our school, including the rights to be kept safe and protected from harm, listened to, and heard.
4. 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, Child Safeguarding: A Guide for Policy, Procedure and Practice, 2018, and the Children First Act, 2015.
5. Our policy declaration applies to all staff who are now mandated persons and volunteers working within our school.
6. We will review our Child Safeguarding Statement and accompanying Child Safeguarding Policies and Procedures every 2 years, or sooner if necessary due to service issues or changes in legislation or national policy.

Our Designated Liaison Person is:

Jo Flinn

086 3099376 or 061 397245

Our Deputy Designated Liaison Person is:

Phil McKeogh

087 2836682



## Risk assessment

Jo and her staff have carried out an assessment of any potential for harm to a child while availing of our services. Below is a list of the areas of risk identified and a summarised list of procedures for managing these risks. This assessment was carried out in March 2023 and it will be reviewed every 2 years or earlier if required.

Risk Identified	Policies and/or Procedures in place to manage Risk
Recruitment, training, support and supervision of staff	<ul style="list-style-type: none"> <li>● Staff support and supervision Policy</li> <li>● Regular staff appraisals</li> <li>● High staff/child ratio</li> <li>● Nappy changing Policy</li> <li>● Accident &amp; Incident Policy</li> <li>● Change clothes Permission slip signed</li> <li>● Disciplinary Policy</li> <li>● Recruitment Policy</li> <li>● Induction Policy</li> <li>● Garda vetting</li> <li>● Code of behaviour</li> <li>● Complaints Policy</li> <li>● Key worker</li> <li>● Record keeping Policy</li> <li>● All staff complete e-learning programme on safeguarding children</li> <li>● All staff responsible for reporting child protection concerns to the DLP without delay</li> <li>● All staff are familiar with the definitions of abuse</li> <li>● Promote children to be independent in toileting and dressing</li> <li>● Act as role models in respecting each other's privacy</li> </ul>
Interactions with Parents/Carers	<ul style="list-style-type: none"> <li>● Dropping and collecting Policy</li> <li>● Open door Policy</li> <li>● Confidentiality Policy</li> <li>● Communication with Parents at the outset about any health and wellbeing concerns</li> <li>● Policies available</li> <li>● Awareness of child safeguarding statement</li> <li>● Written records pertaining to abuse are stored securely in a locked filing cabinet</li> <li>● Written records are stored indefinitely</li> </ul>
Videos, Photographs, Social media	<ul style="list-style-type: none"> <li>● Photographing, videos, and social media Policy</li> </ul>



## **Child Safeguarding Policies & Procedures in place:**

1. Key Roles in Safeguarding
2. Child Protection and Welfare Reporting Procedures
3. Confidentiality Policy
4. Dealing with Allegations of Abuse or Neglect Against Employees
5. Managing Child Protection Records
6. Recruitment Policy
7. Garda Vetting Policy
8. Code of Behaviour for Working with Children
9. Induction, Training, Supervision and Support of Staff
10. Complaints Policy
11. Policy for Managing Accidents and Incidents
12. Social Media Policy

## **Implementing 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.

This Statement will be reviewed every 2 years or as soon as practicable after there has been a material change in any matter to which the statement refers.

This statement has been published on the service website and is displayed in the service. It has been provided to all staff, volunteers and any other persons involved with the service. It is readily accessible to parents and guardians on request. A copy of this Statement will be made available to Tusla if requested.

### **Implementation Checklist:**

- ✓ The Child Safeguarding Statement is displayed in the service
- ✓ All staff, college students and volunteers have been Garda Vetted
- ✓ All staff, college students and volunteers have read and are familiar with the Child Safeguarding Statement and accompanying Safeguarding policies
- ✓ Everyone in the service has completed the Tusla e-learning course: Introduction to Children First
- ✓ Staff know and understand their obligations under the Children First Act, 2015
- ✓ Everyone in the service knows who to speak to should they have a concern about the well-being of a child
- ✓ Parents are given information about the Safeguarding policies at intake meetings
- ✓ Information on the Safeguarding policies is part of the induction process for new employees, college students and volunteers
- ✓ A Designated Liaison Person for child protection and a Deputy have been appointed
- ✓ Information naming the Designated Liaison Person and Deputy are displayed in the service
- ✓ The Designated Liaison Person and Deputy have attended



## **Appendices**

1. Types of Child Abuse and how they may be recognized
2. Legal Obligations of a Mandated Person
3. Reporting Mandated Concerns
4. Limerick Duty Social Work Teams.
5. Contact details for an Garda Síochána.



**Appendix 1** (Taken from *Children First: National Guidance for the Protection and Welfare of Children, 2017*)

## TYPES OF CHILD ABUSE AND HOW THEY MAY BE RECOGNISED

Child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse. A child may be subjected to one or more forms of abuse at any given time. Abuse and neglect can occur within the family, in the community or in an institutional setting. The abuser may be someone known to the child or a stranger, and can be an adult or another child. In a situation where abuse is alleged to have been carried out by another child, you should consider it a child welfare and protection issue for both children and you should follow child protection procedures for both the victim and the alleged abuser.

The important factor in deciding whether the behaviour is abuse or neglect is the impact of that behaviour on the child rather than the intention of the parent/carer.

The definitions of neglect and abuse presented in this section are not legal definitions. They are intended to describe ways in which a child might experience abuse and how this abuse may be recognised.

### **Neglect**

Child neglect is the most frequently reported category of abuse, both in Ireland and internationally. Ongoing chronic neglect is recognised as being extremely harmful to the development and well-being of the child and may have serious long-term negative consequences.

Neglect occurs when a child does not receive adequate care or supervision to the extent that the child is harmed physically or developmentally. It is generally defined in terms of an omission of care, where a child's health, development or welfare is impaired by being deprived of food, clothing, warmth, hygiene, medical care, intellectual stimulation or supervision and safety. Emotional neglect may also lead to the child having attachment difficulties. The extent of the damage to the child's health, development or welfare is influenced by a range of factors. These factors include the extent, if any, of positive influence in the child's life as well as the age of the child and the frequency and consistency of neglect.

Neglect is associated with poverty but not necessarily caused by it. It is strongly linked to parental substance misuse, domestic violence, and parental mental illness and disability.

A reasonable concern for the child's welfare would exist when neglect becomes typical of the relationship between the child and the parent or carer. This may become apparent where you see the child over a period of time, or the effects of neglect may be obvious based on having seen the child once.



The following are features of child neglect:

- Children being left alone without adequate care and supervision
- Malnourishment, lacking food, unsuitable food or erratic feeding
- Non-organic failure to thrive, i.e. a child not gaining weight due not only to malnutrition but also emotional deprivation
- Failure to provide adequate care for the child's medical and developmental needs, including intellectual stimulation
- Inadequate living conditions – unhygienic conditions, environmental issues, including lack of adequate heating and furniture
- Lack of adequate clothing
- Inattention to basic hygiene
- Lack of protection and exposure to danger, including moral danger, or lack of supervision appropriate to the child's age
- Persistent failure to attend school
- Abandonment or desertion

## **Emotional abuse**

Emotional abuse is the systematic emotional or psychological ill-treatment of a child as part of the overall relationship between a caregiver and a child. Once-off and occasional difficulties between a parent/carer and child are not considered emotional abuse. Abuse occurs when a child's basic need for attention, affection, approval, consistency and security are not met, due to incapacity or indifference from their parent or caregiver. Emotional abuse can also occur when adults responsible for taking care of children are unaware of and unable (for a range of reasons) to meet their children's emotional and developmental needs. Emotional abuse is not easy to recognise because the effects are not easily seen.

A reasonable concern for the child's welfare would exist when the behaviour becomes typical of the relationship between the child and the parent or carer.

Emotional abuse may be seen in some of the following ways:

- Rejection
- Lack of comfort and love
- Lack of attachment
- Lack of proper stimulation (e.g. fun and play)
- Lack of continuity of care (e.g. frequent moves, particularly unplanned)
- Continuous lack of praise and encouragement
- Persistent criticism, sarcasm, hostility or blaming of the child
- Bullying
- Conditional parenting in which care or affection of a child depends on his or her behaviours or actions
- Extreme overprotectiveness
- Inappropriate non-physical punishment (e.g. locking child in bedroom)
- Ongoing family conflicts and family violence
- Seriously inappropriate expectations of a child relative to his/her age and stage of development



There may be no physical signs of emotional abuse unless it occurs with another type of abuse. A child may show signs of emotional abuse through their actions or emotions in several ways. These include insecure attachment, unhappiness, low self-esteem, educational and developmental underachievement, risk taking and aggressive behaviour.

It should be noted that no one indicator is conclusive evidence of emotional abuse. Emotional abuse is more likely to impact negatively on a child where it is persistent over time and where there is a lack of other protective factors.

## **Physical abuse**

Physical abuse is when someone deliberately hurts a child physically or puts them at risk of being physically hurt. It may occur as a single incident or as a pattern of incidents. A reasonable concern exists where the child's health and/ or development is, may be, or has been damaged as a result of suspected physical abuse.

Physical abuse can include the following:

- Physical punishment
- Beating, slapping, hitting or kicking
- Pushing, shaking or throwing
- Pinching, biting, choking or hair-pulling
- Use of excessive force in handling
- Deliberate poisoning
- Suffocation
- Fabricated/induced illness
- Female genital mutilation

The Children First Act 2015 includes a provision that abolishes the common law defence of reasonable chastisement in court proceedings. This defence could previously be invoked by a parent or other person in authority who physically disciplined a child. The change in the legislation now means that in prosecutions relating to assault or physical cruelty, a person who administers such punishment to a child cannot rely on the defence of reasonable chastisement in the legal proceedings. The result of this is that the protections in law relating to assault now apply to a child in the same way as they do to an adult.

## **Sexual abuse**

Sexual abuse occurs when a child is used by another person for his or her gratification or arousal, or for that of others. It includes the child being involved in sexual acts (masturbation, fondling, oral or penetrative sex) or exposing the child to sexual activity directly or through pornography.

Child sexual abuse may cover a wide spectrum of abusive activities. It rarely involves just a single incident and in some instances occurs over a number of years. Child sexual abuse most commonly happens within the family, including older siblings and extended family members.



Cases of sexual abuse mainly come to light through disclosure by the child or his or her siblings/friends, from the suspicions of an adult, and/or by physical symptoms.

Examples of child sexual abuse include the following:

- Any sexual act intentionally performed in the presence of a child
- An invitation to sexual touching or intentional touching or molesting of a child's body whether by a person or object for the purpose of sexual arousal or gratification
- Masturbation in the presence of a child or the involvement of a child in an act of masturbation
- Sexual intercourse with a child, whether oral, vaginal or anal
- Sexual exploitation of a child, which includes:
  - Inviting, inducing or coercing a child to engage in prostitution or the production of child pornography [for example, exhibition, modelling or posing for the purpose of sexual arousal, gratification or sexual act, including its recording (on film, videotape or other media) or the manipulation, for those purposes, of an image by computer or other means]
  - Inviting, coercing or inducing a child to participate in, or to observe, any sexual, indecent or obscene act
  - Showing sexually explicit material to children, which is often a feature of the 'grooming' process by perpetrators of abuse
- Exposing a child to inappropriate or abusive material through information and communication technology
- Consensual sexual activity involving an adult and an underage person

An Garda Síochána will deal with any criminal aspects of a sexual abuse case under the relevant criminal justice legislation. The prosecution of a sexual offence against a child will be considered within the wider objective of child welfare and protection. The safety of the child is paramount and at no stage should a child's safety be compromised because of concern for the integrity of a criminal investigation.

In relation to child sexual abuse, it should be noted that in criminal law the age of consent to sexual intercourse is 17 years for both boys and girls. Any sexual relationship where one or both parties are under the age of 17 is illegal. However, it may not necessarily be regarded as child sexual abuse. Details on exemptions for mandated reporting of certain cases of underage consensual sexual activity can be found in Chapter 3 of *Children First: National Guidance for the protection and Welfare of Children, 2017*.



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## Appendix 2

### THE LEGAL OBLIGATIONS OF A MANDATED PERSON

Mandated persons have two main legal obligations under the Children First Act 2015. These are:

1. To report the harm of children above a defined threshold to Tusla;
2. To assist Tusla, if requested, in assessing a concern which has been the subject of a mandated report.

#### **Section 14(1) of the Children First Act 2015 states:**

*'...where a mandated person knows, believes or has reasonable grounds to suspect, on the basis of information that he or she has received, acquired or becomes aware of in the course of his or her employment or profession as such a mandated person, that a child—*

1. *(a) has been harmed,*
2. *(b) is being harmed, or*
3. *(c) is at risk of being harmed,*

*he or she shall, as soon as practicable, report that knowledge, belief or suspicion, as the case may be, to the Agency.'*

#### **Section 14(2) of the Children First Act 2015 also places obligations on mandated persons to report any disclosures made by a child:**

*'Where a child believes that he or she—*

1. *(a) has been harmed,*
2. *(b) is being harmed, or*
3. *(c) is at risk of being harmed,*

*and discloses this belief to a mandated person in the course of a mandated person's employment or profession as such a person, the mandated person shall, ... as soon as practicable, report that disclosure to the Agency.'*

#### **Section 2 of the Children First Act 2015 defines harm as follows:**

*'harm means in relation to a child—*

1. *(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,*
2. *(b) sexual abuse of the child.'*



## Appendix 3

### REPORTING MANDATED CONCERNS

#### Criteria for reporting: definitions and thresholds

As a mandated person, under the legislation you are required to report any knowledge, belief or reasonable suspicion that a child has been harmed, is being harmed, or is at risk of being harmed. The Act defines harm as assault, ill-treatment, neglect or sexual abuse, and covers single and multiple instances. The four types of abuse are described in Appendix 1. The threshold of harm for each category of abuse at which mandated persons have a **legal** obligation to report concerns is outlined below.

If you are in doubt about whether your concern reaches the legal definition of harm for making a mandated report, Tusla can provide advice in this regard. You can find details of who to contact to discuss your concern on the Tusla website ([www.tusla.ie](http://www.tusla.ie)). If your concern does not reach the threshold for mandated reporting, but you feel it is a **reasonable concern** about the welfare or protection of a child, you should report it to Tusla under the *Children First: National Guidance*.

#### NEGLECT

Neglect is defined as 'to deprive a child of adequate food, warmth, clothing, hygiene, supervision, safety or medical care'. The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child's needs have been neglected, are being neglected, or are at risk of being neglected to the point where **the child's health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.**

#### EMOTIONAL ABUSE/ILL-TREATMENT

Ill-treatment is defined as 'to abandon or cruelly treat the child, or to cause or procure or allow the child to be abandoned or cruelly treated'. Emotional abuse is covered in the definition of ill-treatment used in the Children First Act 2015.

The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being ill-treated to the point where **the child's health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.**

#### PHYSICAL ABUSE

Physical abuse is covered in the references to assault in the Children First Act 2015. The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being assaulted and that as a result **the child's**



**health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.**

## SEXUAL ABUSE

If, as a mandated person, you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being sexually abused, then you must report this to Tusla under the Children First Act 2015.

Sexual abuse to be reported under the Children First Act 2015 [as amended by section 55 of the Criminal Law (Sexual Offences) Act 2017] is defined as an offence against the child, as listed in Schedule 3 of the Children First Act 2015.

A full list of relevant offences against the child which are considered sexual abuse is set out in **Appendix 3** of *Children First: National Guidance*.

As all sexual abuse falls within the category of **seriously affecting a child's health, welfare or development**, you must submit all concerns about sexual abuse as a mandated report to Tusla. There is one exception, which deals with certain consensual sexual activity between teenagers, which is outlined on page 23 of *Children First: National Guidance*.

### Disclosures of abuse from a child

If, as a mandated person, you receive a disclosure of harm from a child, which is above the thresholds set out above, you must make a mandated report of the concern to Tusla. **You are not required to judge the truth of the claims or the credibility of the child.** If the concern does not meet the threshold to be reported as a mandated concern you should report it to Tusla as a reasonable concern under *Children First: National Guidance*.

If you receive a disclosure of harm from a child, you may feel reluctant to report this for a number of reasons. For example, the child may say that they do not want the disclosure to be reported, or you may take the view that the child is now safe and that the involvement of Tusla may not be desired by either the child or their family. However, you need to inform Tusla of all risks to children above the threshold, as the removal of a risk to one child does not necessarily mean that there are no other children at risk. The information contained in a disclosure may be critical to Tusla's assessment of risk to another child either now or in the future.

You should deal with disclosures of abuse sensitively and professionally. The following approach is suggested as best practice for dealing with these disclosures.

- React calmly
- Listen carefully and attentively
- Take the child seriously
- Reassure the child that they have taken the right action in talking to you
- Do not promise to keep anything secret
- Ask questions for clarification only. Do not ask leading questions
- Check back with the child that what you have heard is correct and understood
- Do not express any opinions about the alleged abuser
- Ensure that the child understands the procedures that will follow



Make a written record of the conversation as soon as possible, in as much detail as possible  
Treat the information confidentially, subject to the requirements of the *Children First: National Guidance* and legislation

### What is my Duty of Confidentiality?

What if you have concerns about the welfare and/or safety of a child or young person in Limerick city or County you can now make a report into the central system. However, you know that the child/young person you are concerned about already has an allocated social worker, you should still contact that person or his/her section.

Where is my duty of confidentiality? - Children you can contact a centralised Contact Centre Social Work Services.

Who? This service is open to any child/young person, family member of the community, professional or agency.

How? You can report your concern in person, by telephone or in writing to the local child and family service in the area where the child lives. Contact details for local social work teams are available at [www.welfare.ie](http://www.welfare.ie).

What are the forms for reporting child protection and welfare concerns - The Child Protection and Welfare Report Form (CPWRF) and the Retrospective Abuse Report Form (RARE). The Child Protection and Welfare report Form is to be completed and submitted to Tusla for concerns about children under the age of 18. A web portal has been developed to allow for the secure submission of CPWRF's to Tusla. The Retrospective Abuse Report form is to be completed and submitted to Tusla for cases of adults disclosing childhood abuse. It is not currently possible to submit RARE's using the web portal. Both the CPWRF and the RARE can be downloaded at [www.tusla.ie](http://www.tusla.ie). If using a hardcopy CPWRF or RARE, the completed form should be sent to the Duty social work team in the area that the child resides.

Child and Family Agency  
Unit 3, St. Charles Hospital,  
Shelburne Rd., Limerick  
Tel: 011 55606



## Appendix 4.

### TUSLA Child and Family Agency

#### Limerick Duty & Intake Social Work Service

**What:** If you have a concern about the welfare and/or safety of a child who lives in Limerick city or County you can now make a report into one referral point. If, however, you know that the child/family you are concerned about already has an allocated social worker you should still contact that person or the local office.

**When:** Monday to Friday 9.00am – 5.00pm; you can contact a centralised Duty and Intake Social Work Service.

**Who:** This service is open to any child/young person, family, member of the community, professional or agency.

**How:** You can report your concern in person, by telephone or in writing to the local social work duty service in the area where the child lives. Contact details for local social work teams are available at [www.tusla.ie](http://www.tusla.ie).

Tusla has 2 forms for reporting child protection and welfare concerns - The Child Protection and Welfare Report Form (CPWRF) and the Retrospective Abuse Report Form (RARF). The Child Protection and Welfare report Form is to be completed and submitted to Tusla for concerns about children under the age of 18. A web portal has been developed to allow for the secure submission of CPWRF's to Tusla. The Retrospective Abuse Report form is to be completed and submitted to Tusla for cases of adults disclosing childhood abuse. It is not currently possible to submit RARF's using the web portal. Both the CPWRF and the RARF can be downloaded at [www.tusla.ie](http://www.tusla.ie). If using a hardcopy CPWRF or RARF, the completed form should be sent to the Duty social work team in the area that the child resides.

Child and Family Agency  
Unit 3, St. Camillus Hospital,  
Shelbourne Rd., Limerick  
Tel : 061 588688



## **Appendix 5.**

### **Contact Details for An Garda Síochána**

Croom Garda Station,  
Croom,  
Co. Limerick  
V35 EW73

Tel: +35361397240

District HQ: Newcastlewest

District HQ Tel: +353 69 20657

District Officer: Superintendent Aileen Magner

Divisional HQ: Henry Street

Divisional HQ Tel: +353 61 212411

Divisional Officer: Chief Superintendent Gerard Roche

***Call 999/112 or your local Garda Station if an immediate response is required.***

Dr Conor Geaney, Croom Medical Centre: 061 600884

University Hospital Limerick :061 301111